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Bib Data Sheet

CONFIRMATION NO. 6208

SERIAL NUMBER 10/007,061	FILING DATE 11/30/2001 RULE	CLASS 239	GROUP ART UNIT 3752	ATTORNEY DOCKET NO. BVTP-P03-007
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/250,410 11/30/2000
 and claims benefit of 60/250,425 11/30/2000
 and claims benefit of 60/250,537 11/30/2000
 and claims benefit of 60/250,573 11/30/2000

(JSH)

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 01/24/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature JS/	NJ	21	18	2

ADDRESS

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TITLE

Injection systems

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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